

Communicable Diseases Weekly Report

Week 50, 6 December to 12 December 2020

In summary, we report:

- [Legionnaires' disease](#) – cluster of cases in South-Eastern Sydney
- [Flooding and health risks](#) – managing health risks during and after flooding
- [Novel coronavirus 2019 \(COVID-19\)](#)
- [Summary of notifiable conditions activity in NSW](#)

For further information see NSW Health's [infectious diseases page](#). This includes links to other NSW Health [infectious disease surveillance reports](#) and a [diseases data page](#) for a range of notifiable infectious diseases.

Legionnaires' disease

Four cases of legionellosis due to *Legionella pneumophila* were notified in this reporting week, with a further four cases caused by *Legionella longbeachae* ([Table 1](#)).

One of the four *L. pneumophila* cases notified in this reporting week was found to have ties to the St George area. A [media release](#) has been issued by South Eastern Sydney Local Health District, alerting residents of the St George area to be alert for signs and symptoms of Legionnaires' disease because three other cases of the infection were notified in people who had spent time in the area over the last four weeks.

Legionnaires' disease is an infection of the respiratory system, and usually causes fever, chills, cough and shortness of breath. Some people also have muscle aches, headache, tiredness, loss of appetite and diarrhoea. Legionnaires' disease can result in severe pneumonia and usually affects people over the age of 50, especially those with existing lung conditions, smoking history or suppressed immune systems.

Legionnaires' disease is not spread from person to person. *Legionella* bacteria are present in the environment, and infection may occur after breathing in contaminated water vapour or dust. There are two types of *Legionella* bacteria commonly associated with Legionnaire's disease: *L. pneumophila* and *L. longbeachae*. *L. pneumophila* may be found in building water systems, such as air-conditioning cooling towers and warm water systems, and has been associated with spas, showerheads and other aerosol-producing devices. *L. longbeachae* may contaminate soil, including bagged potting mix and landscaping products.

Reducing risk of Legionnaires' disease

Certain activities such as gardening, irrigation, and re-commissioning of spas or large air-conditioning systems may increase the risk of *Legionella* bacteria exposure.

The risk of Legionnaires' disease can be reduced by:

- Businesses ensuring water cooling towers are well maintained – particularly after periods of decommission, in line with [NSW Public Health Regulations](#).
- Regular maintenance, including disinfection of spas, hot tubs and irrigation systems – particularly those sourced from stagnant water such as dams or reservoirs.
- Taking appropriate precautions when gardening and handling soil, potting mix and similar products:
 - Wet down products while working to reduce dust.
 - Use appropriate personal protective equipment including mask and gloves.

- Wash hands after handling products and before eating, drinking, or smoking.

Further information:

- [NSW Health Legionnaires' disease fact sheet](#)
- [NSW Health Legionellosis notification data page](#)

Flooding and health risks

Excessive rainfall in Northern NSW this summer is resulting in widespread flooding across the region. Flooding can cause immediate and devastating effects, but there are several health risks associated with flooding that can persist for weeks.

Health risks during floods:

It is important to listen to local emergency services announcements if flooding is expected in your area. These may include boil water alerts if drinking water is potentially contaminated.

If a boil water alert is issued, cooled boiled water (or bottled water) should be used for:

- Drinking (including pets)
- Cooking
- Washing raw foods
- Brushing teeth

Dishes should be washed with hot water and soap, or in a dishwasher.

In the event of flooding you may need to move stock, equipment, garbage containers and any chemicals to higher ground to avoid loss of property or potential contamination. Follow [tetanus](#) immunisation recommendations and seek medical attention for dirty wounds or wounds where the skin has been penetrated such as with a dirty nail.

Ensure you keep essential medications and portable medical devices accessible, and with you. See your GP to ensure you have an adequate supply of essential medication at all times.

Flood waters are extremely dangerous. Do not enter or drive into flood waters.

For help or assistance:

- If you need emergency assistance in a flood or storm, call the State Emergency Service (SES) on 132 500.
- For a medical, police or fire emergency call Triple Zero (000).
- Health advice is also available 24 hours a day from healthdirect Australia on 1800 022 222.
- A number of resources are available for [mental health advice](#) during and after emergencies.

Health risks after floods:

Food and medicine safety:

Flooding often results in extended power outages, which can lead to food and medicine spoilage. Any food or medicine that has been in contact with floodwater should be discarded.

The [NSW Food Authority](#) provides advice on food safety after floods and power outages.

Medications that have been contaminated by floodwater should not be used, and medications that require refrigeration may need to be discarded after power outages (unless essential to sustain health, in which case the medicine should be used until a new supply is available). For information on medications affected by power outages or floodwater, speak to your pharmacist or doctor, or contact healthdirect on 1800 022 222.

Water-borne disease risks:

Floodwater may be contaminated by sewage, manure, chemicals and harmful debris. Flooding can also cause contamination of drinking water and natural water sources such as creeks, rivers and the ocean. This increases the risk of water-borne disease such as [cryptosporidiosis](#). It can also increase

the risk of [leptospirosis](#), which can be associated with exposure to flood water contaminated with urine from infected animals.

- Natural water sources should not be used for swimming for a week after heavy rain.
- While swimming, avoid swallowing water.
- Water from natural sources should not be drunk unless it has been boiled to a rolling boil.

Entering floodwater, even for the purposes of clean up, should be avoided at all costs.

Mosquito-borne risks:

After flooding, mosquito activity generally increases due to the presence of standing water. Increased mosquito activity can be a nuisance, but can also increase the risk of viruses transmitted by mosquitoes such as [Ross River Virus](#) and [Barmah Forest Virus](#).

To avoid mosquito bites and reduce the risk of virus transmission:

- Empty out containers which may have become filled with water during rain or flooding.
- Avoid being outdoors at dawn and dusk when mosquitoes are most active.
- If you are outdoors, wear loose-fitting long sleeves and pants, and apply an appropriate mosquito repellent.
- Use mosquito netting around beds, following safety guidelines.

Further information

- [Emergency preparedness – storms and floods](#)
- [Mosquito control and floods](#)

Novel coronavirus 2019 (COVID-19)

For up-to-date information regarding the COVID-19 outbreak and the NSW response, please visit the [NSW Health COVID-19 page](#).

Summary of notifiable conditions activity in NSW

The following table summarises notifiable conditions activity over the reporting period (Table 1).

Table 1. NSW Notifiable conditions from 6 December to 12 December 2020, by date received*

		Weekly		Year to date			Full Year	
		This week	Last week	2020	2019	2018	2019	2018
Enteric Diseases	Cryptosporidiosis	14	4	531	642	694	669	708
	Giardiasis	25	25	1723	3198	2859	3271	2936
	Rotavirus	5	3	452	1630	792	1755	807
	STEC/VTEC	5	4	101	75	57	80	57
	Salmonellosis	55	50	2728	3431	3189	3556	3334
	Shigellosis	2	1	487	838	506	867	529
Respiratory Diseases	Influenza	4	0	7472	115990	17004	116446	17408
	Legionellosis	8	2	147	148	164	153	171
	Tuberculosis	14	18	574	572	489	591	508
Sexually Transmissible Infections	Chlamydia	539	504	26106	31560	30260	32442	31175
	Gonorrhoea	177	172	9551	11363	10293	11702	10600
Vaccine Preventable Diseases	Pneumococcal Disease (Invasive)	8	8	338	666	663	692	681
Vector Borne Diseases	Barmah Forest	2	0	269	61	72	62	74
	Ross River	3	10	1966	582	559	592	571
Zoonotic Diseases	Leptospirosis	1	0	12	8	56	9	56
	Psittacosis	1	1	26	10	7	11	7
	Q fever	4	4	194	242	227	248	228

* Notes on Table 1: NSW Notifiable Conditions activity

- Only conditions which had one or more case reports received during the reporting week appear in the table.

- Due to the rapidly evolving nature of the situation, data on COVID-19 notifications can be found separately on the NSW Health [Latest Updates on COVID-19](#) page.
- Data cells represent the number of case reports received by NSW public health units and recorded on the NSW Notifiable Conditions Information Management System (NCIMS) in the relevant period (i.e. by report date).
- Note that [notifiable disease data](#) available on the NSW Health website are reported by onset date so case totals are likely to vary from those shown here.
- Cases involving interstate residents are not included.
- The shigellosis case definition changed on 1 July 2018 to include probable cases (PCR positive only), hence case counts cannot be validly compared to previous years.
- Data cells in the 'Adverse Event Following Immunisation' category refer to suspected cases only. These reports are referred to the Therapeutic Goods Administration (TGA) for assessment. Data on adverse events following immunisation is available online from the TGA [Database of Adverse Event Notifications](#).
- Chronic blood-borne virus conditions (such as HIV, hepatitis B and C) are not included here. Related data are available from the [Infectious Diseases Data](#), the [HIV Surveillance Data Reports](#) and the [Hepatitis B and C Strategies Data Reports](#) webpages.
- Notification is dependent on a diagnosis being made by a doctor, hospital or laboratory. Changes in awareness and testing patterns influence the proportion of patients with a particular infection that is diagnosed and notified over time, especially if the infection causes non-specific symptoms.